Form RD 1944-8
(Rev. 4-97)

USDA—RURAL HOUSING SERVICE

TENANT CERTIFICATION

Form Approved
OMB No. 0575-0033

PART I — PROJECT AND UNIT IDENTIFICATION

1. Effective Date: M M D D Y Y

for: ☐ Initial Certification ☐ Re-Certification ☐ Other

2. Project Name	3. Borrower ID and Project Number	4. Unit Type	5. Unit Number

WARNING STATEMENT: Section 1001 of Title 18, United States Code provides, "Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined under this title or imprisoned not more than five years, or both."

STATEMENT REQUIRED BY THE PRIVACY ACT: Title V of the Housing Act of 1949 authorizes RHS to collect the information on this form. Your disclosure of the information is voluntary. However, failure to disclose certain information may delay the processing of your eligibility or rejection. RHS will not deny eligibility if you refuse to disclose your Social Security Number.

This information is collected principally to determine eligibility for occupancy and to determine your tenant contribution for rent. However, the information collected may be released to appropriate Federal, State and Local Agencies, credit bureaus and servicing agents when relevant to civil, criminal or regulatory proceedings or to enforce regulations by manual or automated verification procedures.

Round all monetary figures up to the nearest dollar at .50 and above.

PART II – TENANT HOUSEHOLD INFORMATION

6. Tenant Subsidy Code (enter code) ☐
- 0 — No Deep Tenant Subsidy
- 1 — Rental Assistance (RA)
- 3 — Existing HUD Certificates
- 4 — Other Public RA
- 5 — Private RA
- 6 — HUD Voucher
- 7 — Other Types at Basic Rent

7. Social Security Number	8. Household Member Name *(Last, First and Middle Initial)*	9. Sex	10. Date of Birth (M M D D Y Y)	11. Minor, Disabled, Handicapped or Full-Time Student 18 or Older (Complete this only when household member *is not* the Tenant or a Co-Tenant)	12. Elderly, Disabled or Handi-capped (Complete this only when household member *is a* Tenant or Co-Tenant)

8a. Number of Foster Children *(if any)* ☐

Total *(Line 11)* ☐

(Check below when coded above) Elderly Status ☐

13. Race/National Origin of Tenant (enter code) ☐
- 1 —White, Non Hispanic
- 2 —Black, Non Hispanic
- 3 —Asian, Pacific Isld.
- 4 —American Indian Alaskan Native
- 5 —Hispanic

PART III — ASSET INCOME

14. Net Family Assets (NOTE: If Line 14 does not exceed $5,000, enter zero on Line 15.) $
15. Imputed Income from Assets (Bank Passbook Savings Rate (*) x Line 14.) $
16. Income from Assets $

PART IV — INCOME CALCULATIONS

17. Income
- a. Wages, Salaries, etc. $
- b. Soc. Sec., Pensions, etc. $
- c. Assistance $
- d. Income Contributed by Assets $ *(Greater of Line 15 or Line 16)*
- e. Other $
- f. Annual Income $

18. Adjustments to Income
- a. $480 x total of Line 11 $
- b. $400 if elderly status $
- c. Medical exceeding 3% of Line 17.f. $ *(If elderly, handicapped or disabled)*
- d. Child Care $
- e. Total Adjustments $

19. Adjusted Annual Income $ *(Line 17.f. minus Line 18.e.)*

PART V — INCOME LEVELS

20. Number of Household Members ☐

21. Current Eligibility Income Level *(Enter Code)* ☐

22. Date of Initial Project Entry M M D D Y Y

23. Eligibility Income Level at Initial Project Entry *(Enter Code)* ☐

PART VI — CERTIFICATION BY TENANT

I certify that the information in PARTS II through IV is true and correct to the best of my knowledge and belief. Inquiries may be made to verify this information.

a. Date: M M D D Y Y	b. Tenant Signature
c. Date: M M D D Y Y	d. Co-Tenant Signature

PART VII—PRELIMINARY CALCULATIONS

24. Adjusted Monthly Income *(Line 19 ÷ 12)* a. $ ______ x .30 = b. $ ______

25. Monthly Income *(Line 17.f. ÷ 12)* a. $ ______ x .10 = b. $ ______

26. Designated Monthly Welfare Shelter Payment $ ______

27. Highest of Line 24.b., Line 25.b., or Line 26. ______

28. Gross Basic Rent
   a. Basic Rent $ ______
   b. Utility Allowance $ ______
   c. *(Line 28.a. + Line 28.b.)* $ ______

29. Gross Note Rate Rent
   a. Note Rate Rent $ ______
   b. Utility Allowance $ ______
   c. *(Line 29.a. + Line 29.b.)* $ ______

PART VIII—DETERMINING GROSS TENANT CONTRIBUTION (GTC)

Decision: *(check one)*

☐ A. If tenant *receives rental assistance (RA)* enter Line 27 on Line 30 below. If Line 27 exceeds Line 28.c., go to Decision B since this Tenant will not receive RA.

☐ B. If tenant *does not receive RA* and this project receives Plan II Interest Credit, enter the greater of Line 27 or Line 28.c. (but not to exceed Line 29.c.) on Line 30 below.

☐ C. If tenant *does not receive RA* and this project is a Plan I, Full Profit or Labor Housing project complete Lines C.1. thru C.3. and enter Line C.3. on Line 30.

C.1. Enter Line 29.c. $ ______
C.2. Add Plan I Surcharge (if any) $ ______
C.3. Total (enter on Line 30) $ ______

PART IX—DETERMINING NET TENANT CONTRIBUTION (NTC)

30. GTC (From PART VIII) $ ______
31. Utility Allowance (Line 28.b. or Line 29.b.) $ ______
32. Final NTC (Line 30 minus Line 31) $ ______
(Amount Tenant pays Borrower for rent. If Line 32 is negative, Borrower pays the difference to Tenant for utilities.)

PART X—CERTIFICATION BY BORROWER

I certify that the information on this form has been verified as required by federal law and the tenant household

☐ is eligible to live in the unit, or ☐ has been granted ineligible occupancy by RHS.

Project Name (optional):

a. Date Signed

M M D D Y Y

b. Signature of Borrower or Borrower's Representative

PART XI—RHS CERTIFICATION

Based on information provided by the Borrower, the calculations for this form are correct.

a. Date

M M D D Y Y

b. Signature of RHS Representative

INSTRUCTIONS FOR PREPARATION

1. Borrower (or Borrower's representative) must designate the effective date in Line 1, sign and date in PART X and submit to the Servicing Office by the effective date but no earlier than the month preceding the effective date. Check the appropriate box to indicate the type of certification action.

   NOTE: A tenant certification is effective for 12 full months. For example, a Form RD 1944-8 with an effective date of February 1, 1992, has an effective period from February 1, 1992, until January 31, 1993.

PART I. PROJECT AND UNIT IDENTIFICATION

2. Enter the project name.

3. Enter the project's borrower ID (Example: 0123456789) and project number (017). If you do not know the correct numbers to enter on Line 3, contact your RHS Servicing Office.

4. Enter this tenant household's apartment unit size, according to the following:

   0 — efficiency, no bedrooms
   1 — one-bedroom
   2 — two-bedrooms
   3 — three-bedrooms
   4 — four-bedrooms

   For example:

   | | 1 | — one-bedroom

When there is more than one type of each size of apartment unit, and there is a distinct rental rate for reach type, begin the unit type code as follows:

   S — Small
   M — Medium
   L — Large
   H — Handicapped Design

   For example:

   | S | 1 | — Small one-bedroom
   | M | 1 | — Medium one-bedroom

5. Enter this tenant household's apartment unit number. The unit number may consist of up to six characters of either letters or numbers.

   For example: | A | 1 | 0 | 4 | — Apartment No. A-104
   | | | | 4 | — Apartment No. 4

PART II. TENANT HOUSEHOLD INFORMATION

6. Enter the appropriate code as follows:

   "0" No Deep Tenant Subsidy. Tenants receiving no deep tenant subsidy. "Deep tenant subsidy" is assistance that allows a tenant to contribute less than the basic rent for shelter costs (or note rate rent in those projects with note rate rent only).

   "1" RHS Rental Assistance (RA).

   "3" Existing HUD Certificate. Tenants receiving HUD Section 8 unit assigned specifically to their household.

   "4" Other Public RA. Tenants receiving deep tenant subsidy from any Federal, State or local public agency, other than RHS or HUD.

   "5" Private RA. Tenants receiving deep tenant subsidy funded by a borrower (include rent incentives only when they will be provided for 12 months or longer).

   "6" HUD Voucher. Tenants receiving a HUD Voucher.

   "7" Other Types at Basic Rent. Tenants receiving any other type of deep tenant subsidy not listed above, which requires that the total funds available for rent from the tenant and subsidy provider equal basic rent.

7. Corresponding to the name in Line 8, enter the social security number, when provided, or any Tenant, Co-Tenant or other household member that contributes to income.

8. Enter the name of each tenant household member. Foster children are not considered to be members of the tenant household and are not to be entered on this line. Always place the "tenant's" (person who signs the lease as tenant) name first and the "co- tenant's" (a person who signs the lease as co-tenant) name next.

8a. Enter the number of foster children who will reside in the unit or unborn children anticipated to reside in the unit this certification period. The number of foster or unborn children will be used *only* to determine the appropriate size unit.

9. Corresponding to the name in Line 8, enter the sex of each tenant household member.

10. Corresponding to the name in Line 8, enter the date of birth of each tenant household member.

    For example: | 12 | 02 | 55 | — December 2, 1955

11. Corresponding to the name in Line 8, enter the appropriate code for each tenant household member other than the tenant or co- tenant who is a minor, handicapped, disabled or full-time student 18 or older. Add all the marked boxes and place the total in the box marked "Total". Always code handicapped or disabled minors as handicapped or disabled rather than minors. Always code students under 18 as minors rather than full-time students.

    Code for Line 11: M — Minor
    H — Individual with handicap
    D — Individual with disability
    F — Full-Time Student 18 or Older

    For example: M — Minor

    H — Individual with handicap

The terms *minor, individual with handicap and individual with disability are* defined in Exhibit B to RD Instruction 1930-C, "Management Handbook."

12. Corresponding to the name in Line 8, enter the appropriate code for the tenant or co-tenant if either is considered elderly, or an individual with handicap or disability. If any spaces are coded, check the bottom box to indicate that the household has an elderly family status. Always code an elderly person with a handicap or disability as an individual with handicap or individual with disability rather than elderly.

Code for Line 12:	E — Elderly H — Individual with handicap D — Individual with disability	**For example:**	E — Elderly H — Tenant or cotenant with handicap

The terms *elderly, individual with handicap and individual with disability* are defined in Exhibit B to RD Instruction 1930-C, "Management Handbook".

13. Enter the appropriate code for the race or national origin of the tenant. You are to obtain this information from the tenant household's completed application for occupancy or from the previous tenant certification. If this information is not available leave blank.

PART III. ASSET INCOME

14. Enter all net family assets. "Net Family Assets" is defined in Exhibit B to RD Instruction 1930-C, "Management Handbook".

15. To obtain the imputed income from assets, multiply net family assets (Line 14) by the local interest rate on bank passbook savings and enter the result. Be sure to enter the project's current passbook savings rate in the space provided.

    Note: If net family assets entered in Line 14 do not exceed $5,000, enter zero on this line.

16. Enter actual income received from net family assets.

PART IV. INCOME CALCULATIONS

17. Insert the tenant household's total annual income from each of the sources specified in Line 17a thru 17e, and enter the total from all sources in Line 17f. *Annual income* is defined in Exhibit B to RD Instruction 1930-C, "Management Handbook".

18. Enter any adjustments to income. Add Lines 18a thru 18d and enter the total on Line 18e. *Adjustments to income* are described in the definition of Adjusted annual income in Exhibit B to RD Instruction 1930-C, "Management Handbook".

    a. Multiply $480 times the number indicated in the "Total" box of Line 11.
    b. $400 when "elderly" family status is indicated in Line 12 (Limited to $400 per tenant household).
    c. When Line 12 indicates elderly status, all allowable medical expenses in excess of 3 percent of annual income (Line 17f) may be entered. When Line 12 does not indicate elderly status, only attendant care and apparatus expenses for handicapped or disabled household members in excess of 3 percent of annual income may be entered.
    d. Child care expenses.
    e. Total adjustments.

19. Subtract the total adjustments to income (Line 18e) from annual income (Line 17f) and enter the difference. When adjusted income is less than zero, enter zero on this line.

PART V. INCOME LEVEL

20. Enter the total number of household members described in Line 8. Do not include foster or unborn children.

21. This line determines if the tenant household is income eligible to receive RA and remain in the project. Go to the income tables in Appendix 9 of HB-1-3550 and determine the income level based on the adjusted annual income (Line 19) and the total number of household members (Line 20). You are to code the income level as follows:

V — Very Low-Income	M — Moderate-Income
L — Low-Income	A — Above Moderate (Ineligible)

22. Enter the date this tenant household initially occupied this RHS financed project.

23. For all tenant households who initially occupy this RHS financed project after October 1, 1986, enter the first "Eligibility" income level from Line 21 of the initial Form RD 1944-8, "Tenant Certification". (During subsequent recertification this can be obtained from Line 23 of the preceding tenant certification). This is to be maintained throughout the tenant household's tenancy for comparative purposes. Use the same coding system for income levels described in Line 21.

PART VI. CERTIFICATION BY TENANT

The Tenant and Co-Tenant (if any) must certify to the accuracy of PARTS II through IV by dating and signing in the appropriate space.

PART VII. PRELIMINARY CALCULATIONS

24. Enter the adjusted monthly income [adjusted annual income (Line 19) divided by 12] on Line 24 a. Determine 30 percent (30%) of adjusted monthly income by multiplying Line 24a by .30 as shown on the Form. Enter 30% of adjusted monthly income on Line 24 b.

25. Enter the monthly income [annual income (Line 17f) divided by 12] on Line 25 a. Determine 10 percent (10%) of monthly income by multiplying Line 25 a by .10 as shown on the Form. Enter 10% of monthly income on Line 25 b.

26. Enter the designated monthly welfare shelter payment if applicable. This will be the amount the tenant household actually receives from the Public Assistance Agency for shelter.

27. Compare Lines 24b, 25b and 26 and enter the highest amount.

28. Calculate the gross basic rent, which is the approved basic rent plus any utility allowance, when required. Basic and note rate rents must be shown on the project budget (Form RD 1930-7) for the year and approved according to § 1930.122 of RD Instruction 1930-C. Utility allowances, when required, are determined and approved according to Exhibit A-6 of RD Instruction 1944-E. Any change in rental rates or utility allowances must be processed according to Exhibit C of RD Instruction 1930-C.

    a. Enter the approved basic rent.
    b. Enter the approved utility allowances (if any).
    c. Add Lines 28 a and 28 b and enter the total.

29. Calculate the gross note rate rent which is the approved rent plus any utility allowance, when required.

    a. Enter the approved basic rent.
    b. Enter the approved utility allowances (if any).
    c. Add Lines 29 a and 29 b and enter the total.

PART VIII. DETERMINING GROSS TENANT CONTRIBUTION (GTC)

Check the box that applies to this tenant household and follow the directions for that decision.

NOTE #1: When attempting to provide RA to a new tenant (initial occupancy after October 1, 1986) compare Lines 27 and 28 c. If Line 27 is greater or no RA is available to the tenant, check Decision "B" or "C", because the tenant cannot be assisted by RA.

NOTE #2: Be sure that the "surcharge" mentioned in Line C 2, is the rental surcharge for ineligible tenants described in Exhibit B VI D 7 a of RD Instruction 1930-C. The surcharge is used only by Plan I projects.

PART IX. DETERMINING NET TENANT CONTRIBUTION (NTC)

30. Enter either the GTC as directed by Decisions A, B, or C of Part VIII.

31. Enter the approved utility allowance for this unit.

32. Subtract the utility allowance (Line 31) from the gross tenant contribution (Line 30) and enter the difference. The final net tenant contribution is the amount of "rent" the tenant pays the borrower monthly. When the utility allowance is greater than the gross tenant contribution, the borrower will pay that difference to the tenant (the NTC will be negative).

PART X. CERTIFICATION BY BORROWER

Borrower or borrower's representative must sign and date when satisfied the accompanying statement is accurate.

PART XI. VERIFICATION BY RHS

RHS representative must sign and date when satisfied the accompanying statement is accurate.

NOTE: The completion of a new Tenant Certification is not required when project rents or utility allowances change, or when the tenant household moves to a different unit within the project. To recognize these changes, notate Lines 28 and 29, and recompute Lines 30 thru 32 and 29 when applicable. When a tenant who was eligible for RA, but did not receive it, now is being assigned RA during a certification effective period, correct PART VIII and adjust the remainder of the Form accordingly.

FORMS MANUAL INSERT **FORM RD 1944-8**

To be used for all Rural Rental Housing (RRH) Projects, all Rural Cooperative Housing (RCH) projects, or Labor Housing (LH) projects that have a non-restrictive farm labor clause in the mortgage covenants, and for any LH where rent is to be charged.

PROCEDURE FOR PREPARATION	:	RD Instruction 1930-C, including Exhibits B and E, 1944-D, 1944-E, 1951-K, and 1965-B.
PREPARED BY	:	All RRH, RCH and LH tenants and the borrower or the authorized representative of the borrower organization.
NUMBER OF COPIES	:	Original and two copies for all cases.
SIGNATURES REQUIRED	:	Original by the tenant, co-tenant and borrower or authorized representative of the borrower organization. Copies will be conformed.
DISTRIBUTION OF COPIES	:	Original to the RHS Servicing Office, conformed copy to the tenant; and conformed copy retained by the borrower.

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PAGE 5 OF FORM RD 1944-8

AUTOMATION SUPPLEMENT
FORMS MANUAL INSERT
Form RD 1944-8
Tenant Certification
Multiple Housing Tenant File System (MTFS)

I. PURPOSE.

The automated Multiple Housing Tenant File System (MTFS) provides Rural Development Servicing Offices a quick and reliable method to:

A. Check the approve the calculations on Form RD 1944-8, “Tenant Certification.”

B. Duplicate borrower calculations on Form RD 1944-29, “Project Worksheet for Interest Credit and Rental Assistance,” when all tenants of any multiple family housing (MFH) project are entered.

C. Monitor project performance and borrower compliance through MTFS reports.

II. REQUIRED USE.

All Servicing Offices are required to use and maintain MTFS.

III. SYSTEM OVERVIEW.

MTFS is an on-line, menu driven automated system located and accessed directly through Servicing Office 3B2’s. Each Servicing Office is responsible for the use, integrity and security of their data. The current release of software to be used is MTFS Version 5.1.A.

IV. SOURCE OF DATA.

Entries into MTFS originate from tenant data provided by MFH borrowers on Form RD 1944-8 or on form HUD-50059, “Owner’s Certification of Compliance with HUD’s Tenant Eligibility and Rent Procedures.” Entries for project data originate from Form RD 1905-6, “Management System Card”. Form RD 1930-7, “Multiple Family Housing Project Budget,” the Automated Multiple Housing Accounting System (AMAS), Exhibits C-1 and C-2 of RD Instruction 1930-C, and Exhibit A-6 of RD Instruction 1944-E. County adjusted income limits originate from Appendix 9 of HB-1-3550, “Direct Single Family Housing Programs Field Office Handbook.”

V. RESPONSIBILITIES.

A. Each State Director is responsible for the use of MTFS within their jurisdiction.

B. The State Office Information Resource Manager (IRM) is responsible for assuring that MTFS is installed and operational within the limits of the software, in all Servicing Offices.

C. The State Office AMAS Coordinator is responsible for assuring that MTFS is used by Servicing Offices to meet the goals and objectives of the MFH Program.

D. The Multi Family Housing Portfolio Management Division (MFHPMD) is responsible for the overall administration of MTFS as the “Sponsor Area” with RD Instruction 2006-T.

E. The Application Management Division (AMD), Program Systems Development Branch (PSDB) is responsible for providing assistance to MFHPMD in accordance with RD Instruction 2006-T.

VI. DOCUMENTATION.

Documentation of MTFS which is available to each Servicing Office includes:

A. MTFS Automation Supplement;

B. MTFS Tutorial diskette and guide book;

C. MTFS Detailed and Abbreviated Guides;

D. MTFS Template and Index.